



CRNP/CNM and CRNA CHANGES August 13, 2021 UPDATE

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Licensed Hospital Definition (by proclamation)

- ▶ Meaning a general acute care hospital, a critical access hospital, or a specialized hospital licensed as such by the Alabama Department of Public Health.
- ▶ Must have immediate need to employ or relocate CRNPs, CNMs, CRNAs within the facility to meet the increased demand for healthcare services created by an influx of COVID-19 patients.

Out of State APRNs (CRNP, CNM, CRNA)

- ▶ CRNPs, CNMs, and CRNAs who possess an active, unencumbered RN license and advanced practice approval issued by the appropriate licensing board of another state, DC or a Canadian providence may practice in covered hospitals to the same degree as Alabama CRNPs, CNMs, and CRNAs.
- ▶ Alabama licensure is not required during the Public Health Emergency.

CRNP –

What are the differences from current practice?



Licensed Hospital (LH) based CRNP/CNM practice allows direction from the CMO or designee, which may be in specific patient locations within the hospital such as ED, ICU or elsewhere in the facility. No FTE limits



The CRNP/CNM may practice to their scope of practice and approved protocol and formulary based on education, certification, and training.



CRNP/CNMs are authorized to perform all skills and prescribe from the formulary authorized under the facility's emergency protocols, subject to the CRNP/CNM scope of practice (controlled substance prescribing requires the DEA registration through the ABME).

CRNP/CNM Changes continued

Scope of Practice

- ▶ Broadens what a CRNP/CNM can do through facility emergency protocols including utilizing alternative standards of care and locations to meet patient demand.
- ▶ The Hospital may develop related CRNP/CNM emergency protocols supportive of patient care based on the scope of practice specific to the CRNP/CNM.

CRNP/CNM Hiring and Record Keeping

- ▶ A facility will have NO FTE restrictions and may employ an unlimited number of CRNPs/CNMs.
- ▶ **An application to the ABN is not required**, as the Hospital will perform record keeping during the proclamation period. The Hospital must verify licensure, advanced practice approval, and certification. The ABN will provide a spreadsheet, for employer tracking.
- ▶ Hospital based collaboration for CRNPs/CNMs **does not require payment of a license fee to the ABN.** Approve the provider and get started.

Outside of Licensed Hospitals: Rural Community and Individual Physician Collaboration continue as previously approved

Current Collaborative Practice approvals are limited to 9 FTEs per physician.

CRNP practice is under current approved protocols and formulary - available on the ABN website by specialty. <https://www.abn.alabama.gov/advanced-practice-nursing/>

CRNP/CNM may submit an application to ABN through the normal on-line process.

Upon acceptance by the ABN, and submission of the commencement form and fee to ABME, a temporary permit may be issued for the collaboration.

CRNAs - What are the differences from current practice?

Hospital based CRNA practice allows direction from the CMO or designee, which frees the CRNA to practice in any area, such as ED, ICU, or elsewhere.



Broadens and allows CRNAs to provide full scope of practice, congruent with the proclamation, and employ the full complement of their unique skills outside of the or perioperative period (whether or not associated with the provision of anesthesia).

CRNA Changes Continued

The Hospital may develop CRNA-related emergency protocols supportive of patient care, based on the scope of practice for a CRNA. CRNAs are authorized to perform all skills as authorized in the facility emergency protocols.

CRNAs may practice outside of anesthesia services.

- ▶ **This is a broad change which was previously approved in April 2020 and allows the Hospital to utilize CRNA practice in many different practice models and settings, to plan for patient emergency care and airway management.**



Hospital Hiring and Record Keeping Requirements for CRNA

A Hospital may employ an unlimited number of CRNAs outside of anesthesia services.

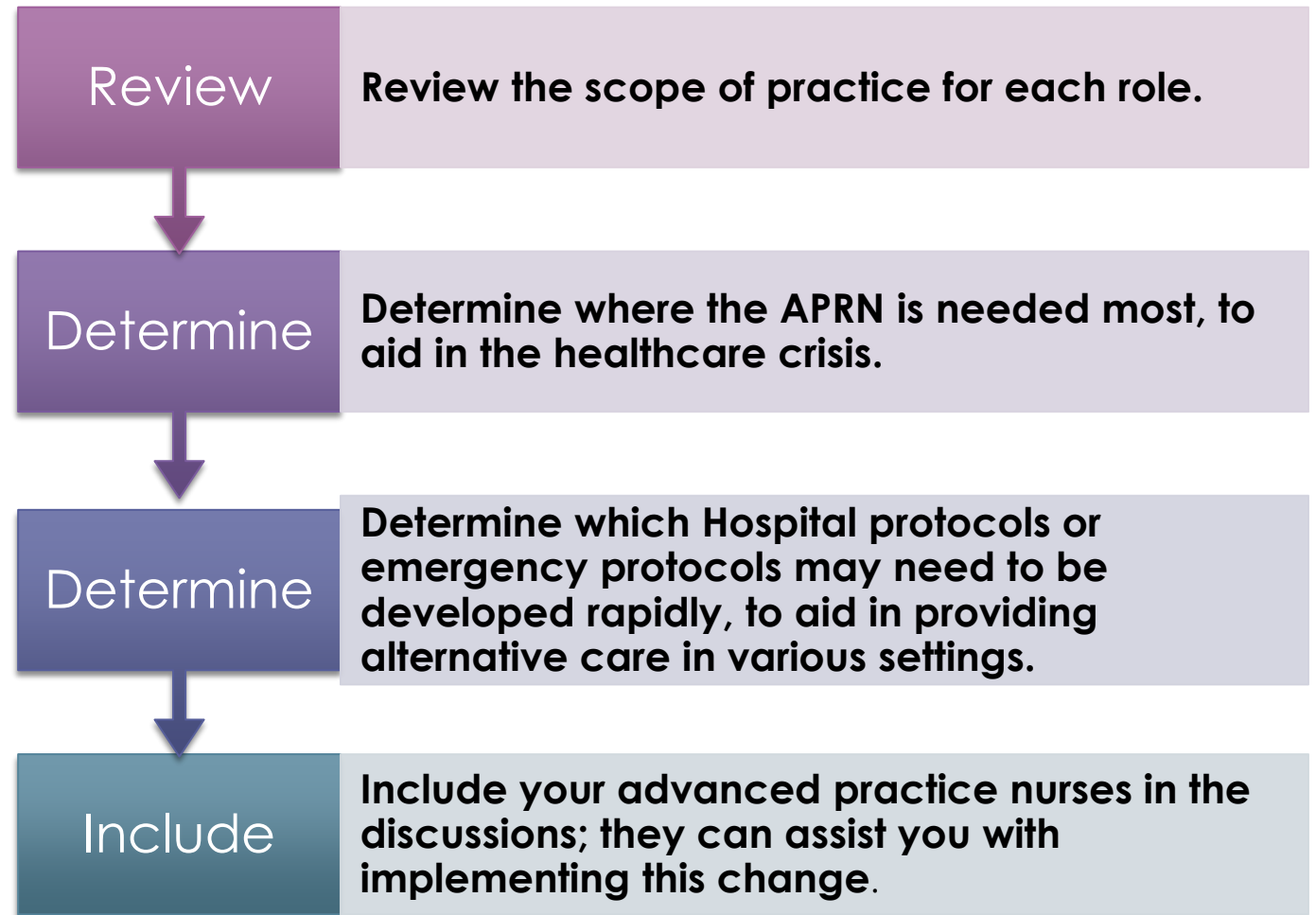


CRNAs do not need to submit applications for approval, as record-keeping will occur at the facility level. The Hospital will need to verify licensure, advanced practice approval, and current certification.



No ABN applications or approval fees are required during emergency proclamation period. Utilize the ABN employer tracking sheet provided to maintain documentation.

How can I utilize the changes to expand services?



Clinical Nurse Specialists – No changes to CNS practice.

As a reminder:

- ▶ **A Clinical Nurse Specialist (CNS) is a registered nurse, who has graduate level nursing preparation, including supervised practice, at the master's or doctoral level as a CNS.**
- ▶ **They are clinical experts in evidence-based nursing practice within a specialty area, treating and managing the health concerns of patients and populations as evidenced by national certification as a CNS. A clinical nurse specialist may perform permitted nursing services as an independent contractor. The independent framework is linked below for consideration and reference in development.**
- ▶ **<https://www.abn.alabama.gov/wp-content/uploads/2018/09/CNS-Independent-Contract-Framework-9-2018.pdf>**

**Don't be
afraid to ask
for help and
input from
others.**



CALL US IF NEEDED. THE
ABN IS HERE TO ASSIST
YOU.

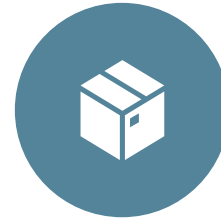
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COLLEAGUES ARE THERE
IN TIMES OF CRISIS.



MENTORS CAN GUIDE
YOU.



THINK OUTSIDE OF THE
BOX.

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